HEALTH DATA INVENTORY

A Compendium of Databases Maintained by the Rhode Island Department of Health

Fourth Edition
January 2002

OFFICE OF HEALTH STATISTICS RHODE ISLAND DEPARTMENT OF HEALTH

PATRICIA A. NOLAN, MD, MPH DIRECTOR OF HEALTH

LINCOLN ALMOND
GOVERNOR

Safe and Healthy Lives in Safe and Healthy Communities

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The Health Data Inventory is a compilation of data systems maintained by the Rhode Island Department of Health (HEALTH). This publication is updated periodically to provide the most current information on HEALTH's data collection efforts.

This year's update was prepared by Colleen M. Ryan, M.P.H., Jana Hesser, Ph.D., and Jay Buechner, Ph.D., Office of Health Statistics, Rhode Island Department of Health, with the assistance of many colleagues responsible for the 30 data systems currently maintained at HEALTH.

The 2002 Health Data Inventory is available electronically on the HEALTH website in portable document format (pdf), at:

http://www.healthri.org/chic/statistics/data2002.pdf

Paper copies of this publication can be obtained from:

Office of Health Statistics Room 407 Rhode island Department of Health 3 Capitol Hill Providence RI 02908

Phone: (401) 222-2550 Fax: (401) 273-4350

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ADOLESCENT SUBSTANCE ABUSE SURVEY

CONTACT: Don Perry, M.P.A.
OFFICE OF HEALTH STATISTICS, (401) 222-7628, DonP@doh.state.ri.us

Purpose or mandate for data collection	To assess prevalence of use of tobacco, alcohol and other drugs among public school-attending students in grades 7-12 in Rhode Island.	
Definition of a case or record in the database	A public school-attending student in grades 7-12 who agrees to participate in the survey.	
Population covered by the database	All students in grades 7-12, attending public schools in Rhode Island, in school districts that choose to participate in the survey.	
When and how data are collected	In general, every second or third year in the spring. Earlier surveys covered longer timeframes (1989-90 and 1991-92).	
When data are available for analysis and reporting	Usually within 12 months after completing data collection. Previous data collection years include 1989-90, 1991-92, 1993, 1995, and 1998.	
Most recent period for which data are available	Spring, 1998.	
Race/Hispanic origin as data items	Race: Yes Hispanic Origin: Yes	
Geographic units recorded	State School District	
Recently published documents	 The 1998 Rhode Island Adolescent Substance Abuse Survey – Report of Statewide Results. Available on the Office of Health Statistics website http://www.healthri.org/chic/statistics/asas.pdf The 1995 Rhode Island Adolescent Substance Abuse Survey – Report of Statewide Results. 	
Routinely responds to ad hoc data requests	Internal requests: Yes External requests: Yes	

BEHAVIORAL RISK FACTOR SURVEILLANCE SYSTEM

CONTACT: Jana Hesser, Ph.D.
OFFICE OF HEALTH STATISTICS, (401) 222-2550, JanaH@doh.state.ri.us

Purpose or mandate for data collection	The Centers for Disease Control and Prevention (CDC) fund all states to conduct surveys on behavioral health risks among adults.		
Definition of a case or record in the database	A randomly selected adult 18 years and older in a telephone household who agrees to participate in the survey.		
Population covered by the database	In most years prior to 1996, a sample of 1,800 Rhode Island adults (ages 18 years and older) which is representative of the statewide population; minority oversampling was conducted in 1996 and 1997; 3,600 adults were sampled annually in 1998, 1999, 2000, 2001 and will be sampled in 2002.		
When and how data are collected	A professional survey research firm conducts an equal number of telephone interviews each month throughout the year, according to protocol established by the CDC. Data have been collected since 1984.		
When data are available for analysis and reporting	Between 3 and 6 months after the last day of the calendar year.		
Most recent period for which data are available	Calendar year 2000. Previous data collection years include 1984-1999. Results are available at the Office of Health Statistics website http://www.healthri.org/chic/statistics/stat_rep.htm and at the CDC BRFSS website http://www.cdc.gov/nccdphp/brfss		
Race/Hispanic origin as data items	Race: Yes Hispanic Origin: Yes		
Geographic units recorded	State City/Town County		
Recently published documents	 Ryan CM and Hesser JE. Health Risks Among Rhode Island Adults, 2000. Office of Health Statistics, Rhode Island Department of Health, Providence, RI. October 2001. (http://www.healthri.org/chic/statistics/brsf2000.pdf) Hesser JE. Utilization of Clinical Preventive Services among Rhode Island Adults With and Without Health Insurance Coverage, 1999. Medicine and Health/Rhode Island. March 2001. 84(3):98-99. (Continues on next page) 		

BEHAVIORAL RISK FACTOR SURVEILLANCE SYSTEM CONTACT: Jana Hesser, Ph.D.

Office (OFFICE OF HEALTH STATISTICS, (401) 222-2550, JanaH@doh.state.ri.us			
Recently published documents (Continued)	 Hackey RB and Hesser JE. Health Risks Among Rhode Island Adults in 1999. Office of Health Statistics, Rhode Island Department of Health, Providence, RI. December 2000. Hesser JE and Markos E. Overweight and Obesity among Rhode Island Adults. Medicine and Health/Rhode Island. November 2000. 83(11):362-3. Buechner JS. Health Disparities among Racial and Ethnic Groups in Rhode Island. Health By Numbers. Office of Health Statistics, Rhode Island Department of Health, Providence, RI. 2(8). August 2000. (http://www.healthri.org/chic/statistics/hbn2-8.pdf) 			
Routinely responds to ad hoc data requests	Internal requests: Yes External requests: Yes			

BIRTH RECORDS

CONTACT: Roberta A. Chevoya
OFFICE OF VITAL RECORDS, (401) 222-2812, RobertaC@doh.state.ri.us

Purpose or mandate for data collection	RIGL 23-3-10 requires registration of all birth records, from which data are derived.		
Definition of a case or record in the database	A child born in the state of Rhode Island or a child born out-of-state to a Rhode Island resident.		
Population covered by the database	All persons born in Rhode Island and all persons born out-of-state to Rhode Island residents.		
When and how data are collected	Data are collected at the hospital using the electronic birth certificate system. Home births are reported by the parents.		
When data are available for analysis and reporting	Preliminary data on births occurring in Rhode Island are available within one year after the end of the calendar year. Final data, including out-of-state births to Rhode Island residents, are available no sooner than 2 years after the end of the calendar year.		
Most recent period for which data are available	Preliminary occurrence data: 2000 Final resident data: 1997		
Race/Hispanic origin as data items	Race: Yes Hispanic Origin: Yes		
Geographic units recorded	State County City/Town Zip Code Census Tract Street Address		
Recently published documents	 1. 1996 Annual Vital Statistics Report. Division of Vital Records, Rhode Island Department of Health. August 2001. 2. 1994-95 Annual Vital Statistics Report. Division of Vital Records, Rhode Island Department of Health. 		
Routinely responds to ad hoc data requests	Internal requests: Yes External requests: Yes		

CANCER REGISTRY

CONTACT: John Fulton, Ph.D.

DIVISION OF DISEASE PREVENTION & CONTROL, (401) 222-1172, JohnF@doh.state.ri.us

Purpose or mandate for data collection	Rhode Island state law mandates the reporting of all newly diagnosed malignant neoplasms and all newly diagnosed benign tumors of the brain and central nervous system. Cancer Registry data are used to: (1) measure the burden of cancer morbidity and mortality in Rhode Island, (2) assist in cancer control planning, and (3) assist in the evaluation of cancer control programs.		
Definition of a case or record in the database	A newly diagnosed malignant neoplasm of any anatomical site or a newly diagnosed benign neoplasm of the brain or central nervous system.		
Population covered by the database	All persons, regardless of residency, who are diagnosed with cancer in Rhode Island.		
When and how data are collected	Health care facilities and providers report cases within 180 days of diagnosis to the Rhode Island Cancer Registry.		
When data are available for analysis and reporting	Data are available approximately 12 months after diagnosis.		
Most recent period for which data are available	Calendar year 1998 (1999 data will be available in November 2001).		
Race/Hispanic origin as data items	Yes		
Geographic units recorded	State Census Tract City/Town County		
Recently published documents	Visit the website http://www.healthri.org/disease/cancer/canpubs.htm		
Routinely responds to ad hoc data requests	Yes		

CENSUS OF FATAL OCCUPATIONAL INJURIES

CONTACT: Roberta A. Chevoya
OFFICE OF VITAL RECORDS, (401) 222-2812, RobertaC@doh.state.ri.us

Purpose or mandate for data	Cooperative agreement with U.S. Bureau of Labor Statistics (BLS).		
collection	Program exists in all states and the District of Columbia to collect data on all workplace injury fatalities.		
Definition of a case or record in the database	A fatal workplace injury, as defined by the BLS for the Census of Fatal Occupational Injuries, is based on a decedent who was employed (working for pay, compensation, or profit) at the time of the event, engaged in a legal work activity, or present at the site of the incident as a requirement of his or her job. Fatalities that occur during a person's commute to or from work are excluded from the census counts.		
Population covered by the database	All workplace injury fatalities in Rhode Island.		
When and how data are collected	Data are collected from death certificates, workers' compensation reports, traffic accident reports, and newspaper obituaries. Data have been collected since 1992.		
When data are available for analysis and reporting	Within one year after end of calendar year.		
Most recent period for which data are available	Calendar year 2000.		
Race/Hispanic origin as data items	Race: Yes Hispanic Origin: Yes		
Geographic units	State	County	City/Town
recorded	Zip Code	Census Tract	Street Address
Recently published documents	 1. 1994 Report of Fatal Occupational Injuries. Division of Vital Records, Rhode Island Department of Health. 2. 1993 Report of Fatal Occupational Injuries. Division of Vital Records, 		
	Rhode Island Department of Health.3. 1992 Report of Fatal Occupational Injuries. Division of Vital Records, Rhode Island Department of Health.		
	Additional fatal occupational injury data can be found on the Bureau of Labor Statistics web site: (http://www.bls.gov/iif/home.htm)		
Routinely responds to ad hoc data requests	Internal requests: Yes External requests: Yes		

DEATH RECORDS

CONTACT: Roberta A. Chevoya
OFFICE OF VITAL RECORDS, (401) 222-2812, RobertaC@doh.state.ri.us

Purpose or mandate for data collection	RIGL 23-3-16 requires registration of all death records, from which data are derived.		
Definition of a case or record in the database	A person who dies in the State of Rhode Island or a Rhode Island resident who has died out-of-state.		
Population covered by the database	All persons who die in Rhode Island and all Rhode Island residents who die out-of-state.		
When and how data are collected	Funeral Directors are responsible for collecting the personal information and for obtaining the cause of death from the physician.		
When data are available for analysis and reporting	Preliminary data on deaths occurring in Rhode Island are available within one year after the end of the calendar year. Final data, including out-of-state deaths of Rhode Island residents, are available no sooner than 2 years after the end of the calendar year.		
Most recent period for which data are available	Preliminary occurrence data: 2000 Final resident data: 1997.		
Race/Hispanic origin as data items	Race: Yes Hispanic Origin: \	′es	
Geographic units	State	County	City/Town
recorded	Zip Code	Census Tract	Street Address
Recently published documents	 Buechner JS. Reductions in Premature Mortality, Rhode Island, 1989-1998. <u>Medicine and Health/Rhode Island</u>. 84(11): 374-5. November 2001. 		
	 1996 Annual Vital Statistics Report. Division of Vital Records, Rhode Island Department of Health. August 2001. 		
	 1994-95 Annual Vital Statistics Report. Division of Vital Records, Rhode Island Department of Health. 		
Routinely responds to ad hoc data requests	Internal requests: External requests		

EARLY INTERVENTION PROGRAM

CONTACT: Christine Robin
DIVISION OF FAMILY HEALTH, (401) 222-5956, (800) 942-7434, ChrisR@doh.state.ri.us

Purpose or mandate for data collection	To collect demographic, diagnosis, and service data on children either referred to or enrolled in the Early Intervention Program for purposes of assessment, assurance, and policy development.	
Definition of a case or record in the database	Any child aged 0-3 years that receives screening/intake at any of the seven Early Intervention sites.	
Population covered by the database	Any child aged 0-3 years referred to the Early Intervention Program.	
When and how data are collected	Data are transferred electronically from each Early Intervention site to the Health Department on a monthly basis.	
When data are available for analysis and reporting	Available on current basis, with approximately one month time lag.	
Most recent period for which data are available	July 2000-September 2001.	
Race/Hispanic origin as data items	Race: Yes Hispanic Origin: Yes	
Geographic units recorded	State City/Town	
Recently published documents	Annual Report Submitted by the Interagency Council of Rhode Island Early Intervention Programs for Infants and Toddlers with Disabilities and Their Families, July 1999-September 2000.	
Routinely responds to ad hoc data requests	Internal requests: Yes External requests: Yes	

EMERGENCY MEDICAL SERVICES AMBULANCE RUN REPORTS

CONTACT: Angela Cairone
OFFICE OF EMERGENCY MEDICAL SERVICES, (401) 222-2401, Angela C@doh.state.ri.us

Purpose or mandate for data collection	Emergency medical services (EMS) regulations require all emergency medical technicians (EMTs) to complete the EMS Ambulance Run Report Form for all emergency calls. Data collected include the nature of the call, disposition of the patient, emergency care administered, and other such data as may be deemed necessary by the Department.		
Definition of a case or record in the database	Any emergency call utilizing a licensed EMS service/ambulance for the provision of prehospital care.		
Population covered by the database	All persons (patients) regarded as an emergency that may utilize a licensed EMS service/ambulance for the provision of prehospital care.		
When and how data are collected	Part I of the ambulance run form is submitted to the Department on a monthly basis. The run form is entered into a computer database by an infrared optical scanner.		
When data are available for analysis and reporting	Per regulation, run reports are submitted to the Department on a monthly basis. Inaccurate forms are returned to the services for correction. Accordingly, reporting is generally 1-3 months following submission of data.		
Most recent period for which data are available	Calendar year 2000.		
Race/Hispanic origin as data items	Race: Yes Hispanic Origin: Yes		
Geographic units recorded	State Census Tract		
Recently	Monthly reports to EMS Services		

Internal requests: Yes

External requests: Yes

2. 2000 Annual Reports to EMS Services

published

Routinely

data requests

responds to ad hoc

documents

FETAL DEATH RECORDS

CONTACT: Roberta A. Chevoya
OFFICE OF VITAL RECORDS, (401) 222-2812, RobertaC@doh.state.ri.us

Purpose or mandate for data collection	RIGL 23-3-10 requires registration of spontaneous fetal death records and reports of induced fetal deaths. Data are derived from these records and reports.		
Definition of a case or record in the database	A fetal death (spontaneous or induced) which occurs in the State of Rhode Island.		
Population covered by the database	All fetal deaths which occur in Rhode Island.		
When and how data are collected	Data are provided by Institutions and Funeral Directors.		
When data are available for analysis and reporting	Preliminary data on fetal deaths occurring in Rhode Island are available within one year after the end of the calendar year. Final data are available no sooner than 2 years after the end of the calendar year.		
Most recent period for which data are available	Preliminary occurrence data: 2000 Final resident data: 1997		
Race/Hispanic origin as data items	Race: Yes Hispanic Origin: Yes		
Geographic units recorded	State County City/Town Zip Code Census Tract Street Address		
Recently published documents	 1. 1996 Annual Vital Statistics Report. Division of Vital Records, Rhode Island Department of Health. August 2001. 2. 1994-95 Annual Vital Statistics Report. Division of Vital Records, Rhode Island Department of Health. 		
Routinely responds to ad hoc data requests	Internal requests: Yes External requests: Yes		

HEALTH CENTER AND PROVIDER OFFICE IMMUNIZATION ASSESSMENTS

CONTACT: Susan Shepardson, MA
OFFICE OF CHILDREN'S PREVENTIVE HEALTH SERVICES, (401) 222-4603,
SusanS@doh.state.ri.us

Purpose or mandate for data collection	Required by the Centers for Disease Control and Prevention (CDC) as a requirement for receiving grant funds. Data are used to assess immunization rates of children in Rhode Island.
Definition of a case or record in the database	Generally, any child aged 2 years who was a patient at a Health Center or private provider office during a given 12-month period.
Population covered by the database	Children seeking regular health care at a health center or private provider office.
When and how data are collected	Data are collected through site visits to health centers, provider offices, and file abstraction on an ongoing basis. About 40% of provider offices and 100% of health centers are reviewed annually.
When data are available for analysis and reporting	Data for previous year are generally available in the Fall. Information released to the public is blinded to protect confidentiality of Health Centers and provider offices.
Most recent period for which data are available	Calendar year 2000.
Race/Hispanic	Race: When available.
origin as data items	Hispanic Origin: When available.
Geographic units recorded	State County City/Town
Recently published documents	2000 Assessment Report.
Routinely responds to ad hoc data requests	Internal requests: Yes External requests: Yes

HEALTH FACILITY FILE

CONTACT: Bill Finocchiaro
OFFICE OF FACILITY REGULATIONS, (401) 222-2566, BillF@doh.state.ri.us

Purpose or mandate for data collection	meet licensing require Registered licensees a	ments outlined in state are surveyed for compl	s for all health facilities that e regulatory guidelines. iance. Lists of licensed on request and posted on
Definition of a case or record in the database	Licensed health facility, including owner, name of facility, and address file. Other information is collected based on facility type.		
Population covered by the database	All licensed facilities.		
When and how data are collected	Data are collected during annual renewals or upon change in ownership.		
When data are available for analysis and reporting	Data are available no later than the end of February for the previous calendar year. Collected data are posted on License2000.		
Most recent period for which data are available	2001.		
Race/Hispanic origin as data items	Race: n/a Hispanic Origin: n/a		
Geographic units recorded	State Zip Code	County Street Address	City/Town State Planning Region
Recently published documents	 Current list of licensed facilities, by type. License2000 is available on the Department of Health website: http://www.healthri.org/hsr/professions/license.htm 		
Routinely responds to ad hoc data requests	Internal requests: Yes External requests: Yes	3	

HEALTH INTERVIEW SURVEY

CONTACT: Jana E. Hesser, Ph.D.

OFFICE OF HEALTH STATISTICS, (401) 222-2550, JanaH@doh.state.ri.us

Purpose or mandate for data collection	To collect information on Rhode Islanders of all ages regarding their health status, health behaviors, health insurance coverage, access to health care and other health related matters.	
Definition of a case or record in the database	A member of a randomly selected telephone household where one knowledgeable adult member reports for all household members.	
Population covered by the database	A sample of about 2,300 Rhode Island households (covering approximately 6,500 persons), representative of all Rhode Island households.	
When and how data are collected	Approximately every five years by telephone. Interviews are conducted by a professional survey organization under contract to the Rhode Island Department of Health. Surveys have been conducted in 1985, 1990 and 1996. Starting with the survey conducted in 2001, plans are to administer the survey biennially.	
When data are available for analysis and reporting	Within 6 - 9 months after completion of interviewing.	
Most recent period for which data are available	1996.	
Race/Hispanic origin as data items	Race: Yes Hispanic Origin: Yes	
Geographic units recorded	State County City/Town Primary Care Area (through 1996)	
Recently published documents	 Kim, H. Hesser, JE, and Buechner, JS. Health Status, Behavioral Health Risks and Health Care Access, and Health Care Utilization Among Rhode Islanders 1990 and 1996. Rhode Island Health Interview Survey. Office of Health Statistics, Rhode Island Department of Health, 2000. (http://www.healthri.org/chic/statistics/his2000.pdf) Buechner, J. and Kim, H. Prevalence of Asthma in Rhode Island. Medicine and Health/Rhode Island. 81(10): 333-4. October 1998. (Continues on next page) 	
Routinely responds to ad hoc data requests	Internal requests: Yes External requests: Yes	

HEALTH INTERVIEW SURVEY

CONTACT: Jana E. Hesser, Ph.D.
OFFICE OF HEALTH STATISTICS, (401) 222-2550, JanaH@doh.state.ri.us

Recently
published
documents
(Continued)

3. Buechner, J. Enrollment in HMOs in Rhode Island. Medicine and Health/Rhode Island. 81(3): 99-100. March 1998.

HIV/AIDS REPORTING SYSTEM

CONTACT: Paul Loberti
OFFICE OF HIV & AIDS, PaulL @doh.state.ri.us
(401) 222-2320

Purpose or mandate for data collection	Confidential HIV (human immunodeficiency virus) and AIDS (acquired immunodeficiency syndrome) reporting and the availability of anonymous HIV reporting is required by the State of Rhode Island.	
Definition of a case or record in the database	HIV: laboratory confirmed HIV positive test. AIDS: Laboratory-confirmed HIV infection with a) CD4 count below 200 cells/μL and/or CD4 percentage of less than 14; or b) the occurrence of one or more of the 26 opportunistic infections (OIs) identified and defined by the Centers for Disease Control and Prevention (CDC).	
Population covered by the database	(1) Rhode Island residents diagnosed in Rhode Island or out-of-state.(2) Out-of-state residents diagnosed or treated in Rhode Island.	
When and how data are collected	Providers continuously report HIV and AIDS cases to the HIV/AIDS Surveillance Team in the Office of HIV/AIDS. The Surveillance Team also conducts site visits to hospitals and outpatient clinics to assure the validity and completeness of the HIV/AIDS database.	
When data are available for analysis and reporting	Data are constantly being updated for analysis. There is a six-month delay in reporting to allow sufficient time for providers to complete reporting of cases for previous 12-month period.	
Most recent period for which data are available	Through calendar year 2000.	
Race/Hispanic origin as data items	Race: Yes Hispanic Origin: Yes	
Geographic units recorded	State County City/Town Zip Code Street Address (AIDS only)	
Recently published documents	 CDC. Morbidity and Mortality Report 50(33):721-8. 2001. (http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5033a5.htm) 2000 Rhode Island Epidemiologic Profile of HIV/AIDS. 	
Routinely responds to ad hoc data requests	Internal requests: Yes External requests: Yes	

HOME VISITING DATA

CONTACT: Deborah Garneau, M.A.
DIVISION OF FAMILY HEALTH, (401) 222-5929, DebG@doh.state.ri.us

D	
Purpose or mandate for data collection	To collect data from home visits provided to pregnant women and newborns or young children at risk for developmental problems or for falling behind in their preventive services. Data are used for assessment, assurance and policy development.
Definition of a case or record in the database	Any at risk pregnant woman or child for whom a home visit was provided.
Population covered by the database	All at risk pregnant women and children who received a home visit.
When and how data are collected	Following each home visit, a data form is completed regarding the content of the visit by each visiting nurse agency.
When data are available for analysis and reporting	Data entered by each visiting nurse agency are electronically transferred to the Health Department on a monthly basis.
Most recent period for which data are available	1999.
Race/Hispanic origin as data items	Race: Yes Hispanic Origin: Yes
Geographic units recorded	State Street Address City/Town Census Tract
Recently published documents	None.
Routinely responds to ad hoc data requests	Internal requests: Yes External requests: Yes

HOSPITAL DISCHARGE DATA

CONTACT: Jay S. Buechner, Ph.D.
OFFICE OF HEALTH STATISTICS, (401) 222-2550, JayB@doh.state.ri.us

Purpose or mandate for data collection	Hospital licensure regulations required all hospitals to report discharge data beginning October 1, 1989.	
Definition of a case or record in the database	Any inpatient discharged from a private acute-care hospital or licensed inpatient rehabilitation facility.	
Population covered by the database	All persons, regardless of residency, who are admitted to Rhode Island hospitals as inpatients.	
When and how data are collected	Data are abstracted from hospital medical records by hospital staff after the patient is discharged.	
When data are available for analysis and reporting	Approximately 9 months after the last day of each calendar quarter (e.g., October 1 – December 31).	
Most recent period for which data are available	Quarter ending December 31, 2000 (as of January 1, 2002).	
Race/Hispanic origin as data items	Race: Yes (single variable with Hispanic Origin) Hispanic Origin: Yes (single variable with Race)	
Geographic units recorded	State County City/Town Zip Code Census Tract	
Recently published documents	 Buechner JS. Trends in Inpatient Cholecystectomies, 1991-2000. Medicine and Health/Rhode Island 84(5): 176-7. May 2001. Tinajero AM and Donelly EF. Trends in Asthma Hospitalizations in Rhode Island. Medicine and Health/Rhode Island 84(6): 212-214. June 2001. 	
Routinely responds to ad hoc data requests	Internal requests: Yes External requests: Yes Public use data file: Yes	

HOSPITAL FINANCIAL OPERATIONS DATASET

CONTACT: Bruce Cryan, MBA, MS
OFFICE OF PERFORMANCE MEASUREMENT AND REPORTING, (401) 222-5123,
BruceC@doh.state.ri.us

Purpose or mandate for data collection	To analyze financial reporting by Rhode Island's hospitals and hospital systems.
Definition of a case or record in the database	Individual hospital.
Population covered by the database	All non-governmental hospitals in Rhode Island.
When and how data are collected	January through June, from primary data sources and hospital surveys.
When data are available for analysis and reporting	June for previous fiscal year.
Most recent period for which data are available	Data are available for 1996-2000.
Race/Hispanic origin as data items	Not Applicable.
Geographic units recorded	Not Applicable.
Recently published documents	 1999 Hospital Costs in Rhode Island: A State by State Comparison. Office of Performance Measurement and Reporting, Rhode Island Department of Health. October 2001. (http://www.healthri.org/chic/performance/hospitalcost99.pdf)
Routinely responds to ad hoc data requests	Yes

INFANT MORTALITY DATA AND LINKED BIRTH-INFANT DEATH RECORDS

CONTACT: Rachel Cain
DIVISION OF FAMILY HEALTH, (401) 222-4610, Rachel C@doh.state.ri.us

Purpose or mandate for data collection	To track infant deaths and to link infant deaths with birth records for trend analysis and assessment.
Definition of a case or record in the database	All deaths among infants aged less than 365 days who died in Rhode Island or Rhode Island resident infants aged less than 365 days who died outside of the state.
Population covered by the database	All infant deaths occurring in Rhode Island and resident infant deaths occurring out of state.
When and how data are collected	Data are obtained from death and birth certificates maintained by the Office of Vital Records.
When data are available for analysis and reporting	Monthly.
Most recent period for which data are available	Calendar years 1990-2000.
Race/Hispanic origin as data items	Race: Yes Hispanic Origin: Yes
Geographic units recorded	State Census Tract City/Town
Recently published documents	Trend analyses have been conducted and are available. 1. Rhode Island Kids Count Fact Book includes infant mortality data. (http://www.rikidscount.org/factbooks.html)
Routinely responds to ad hoc data requests	Internal requests: Yes External requests: Yes

LEAD SCREENING DATA

CONTACT: Anne Primeau-Faubert
CHILDHOOD LEAD POISONING PREVENTION PROGRAM,
DIVISION OF FAMILY HEALTH, (401) 222-4628, AnneP@doh.state.ri.us

Purpose or mandate for data collection	By law, lead screening tests in Rhode Island children must be done by the Department of Health Lab, although diagnostic lead testing can be done by other labs. By law, all lead screening tests done on RI residents are to be reported to this database, including tests done by providers in Massachusetts and Connecticut.	
Definition of a case or record in the database	Each record is the laboratory result of a blood lead test.	
Population covered by the database	All residents of Rhode Island who have been screened for blood lead. The vast majority of tests are for children aged 0-72 months.	
When and how data are collected	Data are collected from lab slips sent in by health care providers who submit samples to the lab.	
When data are available for analysis and reporting	Generally available within 1 month.	
Most recent period for which data are available	Data are available from July 1993 to present, with the exception of the most recent one-month period. Data are available on the Lead Prevention Program website: http://www.health.state.ri.us/family/lead/data.htm	
Race/Hispanic origin as data items	These data are collected but the codes used have changed over time.	
Geographic units recorded	State Census Tract City/Town Zip Code Street Address	
Recently published documents	 Rhode Island Kids Count Fact Book includes lead data. (http://www.rikidscount.org/factbooks.html) Lead Poisoning in Rhode Island by the Numbers. This annual booklet includes summary information on lead poisoning. (http://www.health.state.ri.us/family/lead/facts.htm) Please visit the RI Childhood Lead Poisoning Prevention Program website for the most recent data and information: (http://www.health.state.ri.us/family/lead/data.htm) 	
Routinely responds to ad hoc data requests	Internal requests: Yes External requests: Yes	

LICENSE 2000 CONTACT: Nikki Samaras Deary, Chief HEALTH PROFESSIONS REGULATION (401) 222-7889, NikkiD@doh.state.ri.us

Purpose or mandate for data collection	State statutes require that individuals practicing any of 75 health related professions in Rhode Island be licensed, registered or certified by the Department of Health.	
Definition of a case or record in the database	Licensed health professional in Rhode Island, including application, complaint and compliance, and accounting data.	
Population covered by the database	All individuals, regardless of residency, who practice in health related professions in Rhode Island where a license, registration or certification is required from the Department of Health.	
When and how data are collected	At the time of the initial application for a license, registration, or certification, upon application to renew, at the time of an inspection report, when a complaint is filed, or at the time of any sanction.	
When data are available for analysis and reporting	File maintenance is continuous. Data are current up to the time of the request.	
Most recent period for which data are available	File maintenance is continuous. Data are current up to the time of the request.	
Race/Hispanic origin as data items	Race and Hispanic Origin: New applications will capture these data which will become available on the next renewal cycle for each license type.	
Geographic units recorded	State City/Town Street Address Zip Code	
Recently published documents	More information is available on the LICENSE2000 web site. (http://www.healthri.org/hsr/professions/license.htm)	
Routinely responds to ad hoc data requests	Internal requests: Yes External requests: Yes	

MATERNAL AND CHILD HEALTH DATA

CONTACT: Sam Viner-Brown, MS
DIVISION OF FAMILY HEALTH, (401) 222-5935, SamV@doh.state.ri.us

Purpose or	To determine maternal and child health needs of Rhode Islanders and	
mandate for data collection	assess health status and well being of children and families.	
Definition of a case or record in the database	Any birth, death, or fetal death that occurred in Rhode Island or any Rhode Island resident birth, death, or fetal death that occurred out of state.	
Population covered by the database	All births, deaths, or fetal deaths that occurred in Rhode Island or all Rhode Island resident births, deaths, or fetal deaths that occurred out of state.	
When and how data are collected	Dependent on availability of vital statistics data. As each new year of vital records data become available, they are added to the database.	
When data are available for analysis and reporting	Data are available for analysis within one month after data are loaded into the database.	
Most recent period for which data are available	Vital Statistics: 1996-2000 provisional data are available	
Race/Hispanic origin as data items	Race: Yes Hispanic Origin: Yes	
Geographic units recorded	State Census Tract City/Town Zip Code	
Recently published documents	Data have been included each year in the Rhode Island Kids Count Fact Book (1995 - 2001). (http://www.rikidscount.org/factbooks.html)	
Routinely responds to ad hoc data requests	Internal requests: Yes External requests: Yes	

MINIMUM DATA SET FOR NURSING HOME CARE

CONTACT: Bill Finocchiaro
OFFICE OF FACILITIES REGULATION, (401) 222-4525, BillF@doh.state.ri.us

Purpose or mandate for data collection	Federal mandate CFR485.3 of June 22, 1998 requires all long-term care facilities receiving federal funds to transmit resident assessment data electronically to the State Repository for Resident Assessment at the Department of Health.
Definition of a case or record in the database	An assessment of a resident in a certified Medicare or Medicaid nursing care facility in Rhode Island.
Population covered by the database	All residents in certified Medicare or Medicaid nursing facilities in Rhode Island.
When and how data are collected	Resident assessment data are collected by long term care facilities upon admission, discharge, transfer, quarterly and/or upon significant change in resident status. The data are electronically transmitted to the Rhode Island Department of Health.
When data are available for analysis and reporting	After transmission and validation. The database is dynamic and is continuously updated.
Most recent period for which data are available	From startup of electronic data submission on June 22, 1998. Data are available for the most recent 365 days.
Race/Hispanic origin as data items	Race: Yes Hispanic Origin: Yes
Geographic units recorded	State Facility Zip Code Town/City
Recently published documents	See the Department of Health's website for the most recent report on nursing home care. (http://www.healthri.org/hsr/facilities/nursinghomes/home.htm)
Routinely responds to ad hoc data requests	Data are protected by federal confidentially laws and are not available under the Freedom of Information Act. Aggregate data may be available on a case by case basis.

NATIONAL NOTIFIABLE DISEASE SURVEILLANCE SYSTEM (NNDSS)/NATIONAL ELECTRONIC TELECOMMUNICATIONS SYSTEM FOR SURVEILLANCE (NETSS)

CONTACT: Tara Cooper, MPH
OFFICE OF COMMUNICABLE DISEASE, (401) 222-3284, TaraC@doh.state.ri.us

Purpose or mandate for data collection	Rules and Regulations Pertaining to the Reporting of Communicable, Environmental and Occupational Diseases are promulgated pursuant to the authority set forth in the General Laws of Rhode Island. Communicable Disease regulations require the reporting of certain communicable diseases by health care providers, laboratories and health care institutions as a condition of licensure in Rhode Island.
Definition of a case or record in the database	A case is an incident of a reportable, communicable disease (approx. 60 diseases) that meets the standard surveillance case definition, based on uniform clinical and laboratory criteria developed by the Centers for Disease Control and Prevention (CDC), in collaboration with the Council of State and Territorial Epidemiologists, and adopted by states.
Population covered by the database	Rhode Island residents who are classified as a case of a reportable, communicable disease.
When and how data are collected	Generally licensed health care providers and/or laboratories report positive laboratory results to the Office of Communicable Disease. Program staff conducts telephone interviews and reviews hospital records to complete case reporting forms for each disease.
When data are available for analysis and reporting	Case report forms are entered into NETSS and weekly reports (line listings) are transmitted electronically to the NNDSS at CDC for inclusion in the National Notifiable Disease weekly updates in the Morbidity and Mortality Weekly Report (MMWR). Provisional data are continuously available for analysis. The most recent complete calendar year of data is available within three months after the end of the calendar year.
Most recent period for which data are available	Provisional year-to-date data for the current year are available for comparison with other years, outbreak identification, etc, in the most recent weekly CDC publication, Morbidity and Mortality Weekly Report.
Race/Hispanic origin as data items	Race: Yes Hispanic Origin: Yes
Geographic units recorded	State City/Town County Zip Code Street Address
Recently published documents	Data on notifiable diseases are published weekly in MMWR. (http://www.cdc.gov/mmwr) (Continues on next page)

NATIONAL NOTIFIABLE DISEASE SURVEILLANCE SYSTEM (NNDSS)/NATIONAL ELECTRONIC TELECOMMUNICATIONS SYSTEM FOR SURVEILLANCE (NETSS)

CONTACT: Tara Cooper, MPH
OFFICE OF COMMUNICABLE DISEASE, (401) 222-3284, TaraC@doh.state.ri.us

Routinely responds to ad hoc data requests

Internal requests: Yes External requests: Yes

SCHOOL IMMUNIZATION SURVEY

CONTACT: Susan Shepardson, MA
OFFICE OF CHILDREN'S PREVENTIVE HEALTH SERVICE, (401) 222-4603,
SusanS@doh.state.ri.us

Purpose or mandate for data collection	Required by the Centers for Disease Control and Prevention (CDC) as a requirement for receiving grant funds. Data are used to assess immunization rates of children in Rhode Island.
Definition of a case or record in the database	Any child in Rhode Island daycare centers, preschools, Head Start programs, kindergarten, 7 th grade, or transfer students in grades 1-12.
Population covered by the database	All children in Rhode Island daycare centers, preschools, Head Start programs, kindergarten, 7 th grade, or transfer students in grades 1-12.
When and how data are collected	Annually, in the Fall of each year.
data are concered	School nurse teachers submit the required form sent by Rhode Island immunization program.
When data are available for analysis and reporting	Data for previous year are available in February/March.
Most recent period for which data are available	2000 - 2001 school year.
Race/Hispanic	Race: No
origin as data items	Hispanic Origin: No
Geographic units recorded	Schools City/Town County
Recently published documents	1. 2000 - 2001 Annual Immunization Assessment Report.
Routinely responds to ad hoc	Internal requests: Yes
data requests	External requests: Yes

SEXUALLY TRANSMITTED DISEASES SURVEILLANCE

CONTACT: Michael Gosciminski, MT, MPH
OFFICE OF COMMUNICABLE DISEASE, (401) 222-1365, MichaelGo@doh.state.ri.us

Purpose or mandate for data collection	Sexually transmitted diseases (Chancroid, Chlamydia, Gonorrhea, Lymphogranuloma Venereum, Syphilis and Granuloma Inguinale) are reportable diseases in Rhode Island.
Definition of a case or record in the database	A case is an incident of a sexually transmitted disease (STD) in a Rhode Island resident.
Population covered by the database	Rhode Island residents with confirmed cases of a sexually transmitted disease.
When and how data are collected	Data are collected by health professionals and laboratories and reported to the Department of Health as cases are detected.
When data are available for analysis and reporting	For the most recent annual morbidity, data are available within 2-3 months after the end of the previous calendar year.
Most recent period for which data are available	Calendar year 2000.
Race/Hispanic origin as data items	Race: Yes Hispanic Origin: Yes
Geographic units recorded	State City/Town County Census Tract Street Address
Recently published documents	Although not "published documents," annual reports to CDC rely on this database for epidemiological profiles of STDs. The most recent CDC report, Sexually Transmitted Disease Surveillance, 2000 is available at the NCHSTP web site (http://www.cdc.gov/std/stats/TOC2000.htm)
Routinely responds to ad hoc data requests	Internal requests: Yes External requests: Yes

TRAUMATIC BRAIN INJURY SURVEILLANCE

CONTACT: Jay S. Buechner, Ph.D. OFFICE OF HEALTH STATISTICS, (401) 222-2550, JayB@doh.state.ri.us

Purpose or mandate for data collection	Rhode Island General Law 23-1-49 requires reporting of hospital discharges with traumatic brain injury (TBI) and traumatic spinal cord injury (TSCI) in Rhode Island.
Definition of a case or record in the database	A traumatic brain or spinal cord injury requiring a hospital admission or causing death.
Population covered by the database	All residents of Rhode Island with TBI or TSCI occurring both in and out-of-state. Minimal data on TBI hospital discharges for non-residents are also available.
When and how data are collected	Hospital discharges in RI with a diagnosis of TBI are reported directly to the DOH. For 1996-99, additional data abstracted from hospital records and the Office of the Medical Examiner records on deaths for RI residents were added to complete the surveillance system. Cases were identified from death certificates and hospital discharge data. Expanded data items were abstracted directly from hospital medical records by DOH.
When data are available for analysis and reporting	Initial reports of TBI discharges are reported by hospitals in RI within weeks of discharge.
Most recent period for which data are available	Traumatic Brain Injury: 1996, 1997, 1998, 1999 Traumatic Spinal Cord Injury: 1998, 1999
Race/Hispanic origin as data items	Race: Yes Hispanic Origin: Yes (grouped with race)
Geographic units recorded	State County City/Town Census Tract
Recently published documents	 Buechner, JS, Speare, MC, Fontes, J. "Hospitalizations for Spinal Cord Injuries, 1994-1998", <u>Medicine and Health/Rhode Island</u>, March 2000.
Routinely responds to ad hoc data requests	Internal requests: Yes External requests: Yes

TUBERCULOSIS SURVEILLANCE

CONTACT: Michael Gosciminski, MT, MPH
OFFICE OF COMMUNICABLE DISEASE, (401) 222-1365, MichaelGo@doh.state.ri.us

Purpose or mandate for data collection	Tuberculosis (TB) is a reportable disease in Rhode Island.
Definition of a case or record in the database	An occurrence of a confirmed, active tuberculosis case in a Rhode Island resident that meets the CDC case definition.
Population covered by the database	All Rhode Island residents with verified TB.
When and how data are collected	Data are collected by health professionals and are reported to the Department of Health when a TB case is confirmed in a Rhode Island resident.
When data are available for analysis and reporting	Data are available within 2-3 months after the end of the previous calendar year.
Most recent period for which data are available	Calendar year 2000.
Race/Hispanic origin as data items	Race: Yes Hispanic Origin: Yes
Geographic units recorded	State County City/Town Zip Code Street Address
Recently published documents	Although not "published documents", the TB database is used to provide epidemiological profiles in annual reports to CDC. Annual frequency distributions of epidemiological variables are readily available in table format to the public. For most recent report, Reported Tuberculosis in the United States, 2000 visit the CDC web site http://www.cdc.gov/nchstp/tb/surv/surv2000/
Routinely responds to ad hoc data requests	Internal requests: Yes External requests: Yes

Universal Newborn Developmental Risk Screening

CONTACT: Ellen Amore, MS
DIVISION OF FAMILY HEALTH, (401) 222-4601, EllenA @doh.state.ri.us

Purpose or mandate for data collection	All infants born in Rhode Island are screened for developmental risk factors in order to determine appropriate service provisions and referral in accordance with section 7.1 of RI General Law R-23-13-EIS (Pertaining to the provision of Early Intervention Services for Infants and Toddlers with Disabilities and Their Families).
Definition of a case or record in the database	Any birth occurring at one of the seven Rhode Island hospitals with maternity units.
Population covered by the database	All newborns, regardless of residency, who are born at one of the seven Rhode Island hospitals with maternity units.
When and how data are collected	Within 24-48 hours following birth, Rhode Island Department of Health's nurse coordinators abstract medical records and birth certificate worksheets for demographic and birth outcome information in order to determine risk status of the newborn. Nurse coordinators enter the information directly into lap top computers while in the hospitals. These data are then sent to the Health Department via modem.
When data are available for analysis and reporting	Data are available for analysis on a current basis. Reports are generated on quarterly and ad hoc basis.
Most recent period for which data are available	2001 (Data are available back to 1993).
Race/Hispanic origin as data items	Race: Yes Hispanic Origin: Yes - grouped with race
Geographic units recorded	State City/Town Census Tract Street Address Zip Code
Recently published documents	Data have been analyzed by demographic variables including: age, race, education level, marital status, insurance, city/town; etc.
Routinely responds to ad hoc data requests	Internal requests: Yes External requests: Yes

WOMEN, INFANT AND CHILDREN FOOD SUPPLEMENT PROGRAM (WIC) CONTACT: Charles W. White DIVISION OF FAMILY HEALTH, (401) 222-5939, Charles W@doh.state.ri.us

Purpose or mandate for data collection	To collect data on WIC participants for assessment, assurance and policy development.
Definition of a case or record in the database	Any pregnant woman, infant or child who participates in the WIC program.
Population covered by the database	All WIC participants.
When and how data are collected	Data are collected by the WIC clinics and entered into the WIC data system. Data are downloaded daily to the Health Department.
When data are available for analysis and reporting	Monthly.
Most recent period for which data are available	2001.
Race/Hispanic origin as data items	Race: Yes Hispanic Origin: Yes
Geographic units recorded	Zip Code Census Tract City/Town Street Address
Recently published documents	WIC Annual Plan which provides the latest available data and information on demographic and risk assessment data on WIC participants.
Routinely responds to ad hoc data requests	Internal requests: Yes External requests: Yes

YOUTH RISK BEHAVIOR SURVEY

CONTACT: Donald K. Perry, MPA
OFFICE OF HEALTH STATISTICS, (401) 222-7628, DonP@doh.state.ri.us

Purpose or mandate for data	The Centers for Disease Control and Prevention fund all states to conduct surveys of secondary school students on behavioral health
collection	risks.
Definition of a case or record in the database	A randomly selected public school-attending student in grades 9-12 who agrees to participate in the survey and whose parents or guardians approve of that participation.
Population covered by the database	A sample of about 2,250 students in grades 9-12 attending public schools in Rhode Island.
When and how data are collected	The data are collected biennially (1995, 1997, 1999, and 2001) during the late Winter and Spring (February - April) through self-administered questionnaires in classrooms. [Note: Response rate for the 1999 YRBS was inadequate for analysis and reporting.
When data are available for analysis and reporting	About 4-5 months after data collection is completed.
Most recent period for which data are available	Spring 2001 (available Winter 2001-2002)
Race/Hispanic	Race: Yes
origin as data items	Hispanic Origin: Yes
Geographic units recorded	State
Recently published	2001 Rhode Island Youth Risk Behavior Survey Summary Report and associated documents will be available in Winter 2001-2002.
documents	1. Youth Risk Behavior Surveillance, United States 1999. MMWR June 9, 2000 vol. 49, No. SS-5. (http://www.cdc.gov/mmwr/PDF/ss/ss4905.pdf)
	2. 1997 Rhode Island Youth Risk Behavior Survey Graphs and Tables. (http://www.healthri.org/chic/statistics/yrbs.pdf)
	3. Youth Risk Behavior Surveillance, United States, 1997 MMWR August 14, 1998 vol. 47, No. SS-3. (http://www.cdc.gov/mmwr/PDF/ss/ss4703.pdf)
Routinely responds to ad hoc data requests	Internal requests: Yes External requests: Yes

YOUTH TOBACCO SURVEY

CONTACT: Donald K. Perry, MPA
OFFICE OF HEALTH STATISTICS, (401) 222-7628, DonP@doh.state.ri.us

Purpose or mandate for data collection	The American Legacy Foundation requires all grant recipients to conduct the YTS to assess tobacco use and related risk factors among middle and high school students. State appropriations and a grant from the Centers for Disease Control and Prevention funded the 2001 survey.
Definition of a case or record in the database	A randomly selected public school-attending student in either grades 6-8 or grades 9-12 who agrees to participate in the survey and whose parents or guardians approve that participation.
Population covered by the database	Two samples of about 2,250 students in grades 6-8 and 2,250 students in grades 9-12 attending public schools in Rhode Island.
When and how data are collected	The data are collected biennially (2001, 2003) during the late Winter and Spring (February - April) through self-administered questionnaires in classrooms.
When data are available for analysis and reporting	About 4-5 months after data collection is completed.
Most recent period for which data are available	Spring 2001 (available Fall, 2001). This was the first administration of the YTS in Rhode Island.
Race/Hispanic origin as data items	Race: Yes Hispanic Origin: Yes
Geographic units recorded	State
Recently published documents	 2001 Rhode Island Youth Tobacco Survey Summary Report and associated documents will be available in Spring 2002. 1. Youth Tobacco Surveillance, United States, 2000. MMWR November 2, 2001 vol. 50, No. SS-4. (http://www.cdc.gov/mmwr/PDF/ss/ss5004.pdf)
Routinely responds to ad hoc data requests	Internal requests: Yes External requests: Yes